



School Nurses and Counselors

School nurses and counselors can help middle school students become and remain well nourished, feel comfortable with their bodies, and communicate concerns about eating disorders to teachers, students, and parents. This information sheet is designed to help you create an environment that discourages disordered eating and promotes the early detection of eating disorders.

Become knowledgeable

The problem of eating disorders is a mental health as well as a physical health issue. Eating disorders are associated with emotional problems and poor eating habits. A student not eating properly is often believed to be “picky,” “difficult,” or even a “normal” adolescent. In reality, these behaviors may be a student’s desperate way of trying to cope with underlying problems.

Eating disorders are related to other health concerns. Eating disorders have been associated with many other health issues, including depression, anxiety disorders, low self-esteem, substance abuse, and physical and sexual abuse.

Students of all ethnic and cultural groups are vulnerable to developing eating disorders. Although rates of anorexia are higher among Caucasian girls, recent research indicates that the incidence of eating disorders among girls of all ethnic and cultural groups is increasing. Although eating disorders occur more frequently among girls, hundreds of thousands of boys and men in this country are also experiencing this problem. Other information sheets in this packet address how eating disorders affect boys and different ethnic and cultural groups.

Although anorexia is the most well known eating disorder, bulimia and binge eating disorder are more common. Bulimic and binge eating behaviors affect male and female adolescents from a variety of ethnic and cultural backgrounds. It is important to know the signs and symptoms of all eating disorders.

“Students’ ability to learn is drastically affected by disordered eating habits and eating disorders. These vulnerable students come to class undernourished and preoccupied with thoughts of food, weight, and body image.”

—Jonelle Rowe, M.D., Office on Women’s Health

Serve as the resource person for your school

As your school’s resource person, you can:

- ◆ Answer questions and provide information to individual staff members.
- ◆ Arrange teacher workshops that meet their certification requirements.
- ◆ Provide information to teachers that can help them identify the signs of eating disorders in students.
- ◆ Increase teachers’ awareness of their own words and actions and how they may unknowingly promote disordered eating, muscle building obsessions, negative body image, and size bias.
- ◆ Identify local and national experts who are qualified to diagnose eating disorders.
- ◆ Initiate parent and community education programs featuring speakers and videos promoting healthy body images.



Become an advocate

You can help create an environment that enhances students' health and their capacity to learn and discourages disordered eating. Possible activities include:

- ◆ Lobbying for appealing, nutritious choices in school lunches and vending machines.
- ◆ Organizing eating disorders education and support groups for students led by trained and knowledgeable facilitators.
- ◆ Supporting media literacy activities.

Become familiar with the signs and symptoms of eating disorders

The early detection of an eating disorder is important to increase the likelihood of successful treatment and recovery. You may notice one or more of the physical, behavioral, and emotional signs and symptoms of eating disorders listed below.

Physical

- ◆ Weight loss or fluctuation in short period of time.
- ◆ Abdominal pain.
- ◆ Feeling full or "bloated."
- ◆ Feeling faint or feeling cold.
- ◆ Dry hair or skin, dehydration, blue hands/feet.
- ◆ Lanugo hair (fine body hair).

Behavioral

- ◆ Dieting or chaotic food intake.
- ◆ Pretending to eat, throwing away food.
- ◆ Exercising frequently for long periods of time.
- ◆ Constantly talking about food.
- ◆ Wearing baggy clothes to hide a very thin body.
- ◆ Frequent trips to the bathroom.

Emotional

- ◆ Complaints about appearance, particularly about being or feeling fat.
- ◆ Sadness or comments about feeling worthless.
- ◆ Perfectionist attitude.

"I fainted once because I was dehydrated. The school nurse figured it all out. She told my parents, and we all started to go for counseling."

—*Current Health*, September 1994

A student may tell you about a friend before you notice any signs yourself. Here are some suggestions for talking to students who are concerned about a friend:

- ◆ Ask students to describe what they have seen or heard their friend say.
- ◆ Tell them that you will follow through and talk with their friend.
- ◆ Discuss whether they want the conversation to be confidential or whether you may use their name when you talk with their friend. Ask if they would like to be present when you talk to their friend.
- ◆ Reassure them that talking to you was the right thing to do. Let them read the information sheet on "**How To Help a Friend.**"
- ◆ Ask students who approach you if they are worried about having an eating disorder.
- ◆ Consider whether they need to talk with a counselor about their concern for their friend.

Take immediate action when there is a concern about a student

Recognize that you do not have the skills to deal with the underlying emotional turmoil that often accompanies eating and exercise problems.

Share information with your school's eating disorders resource person, school nurse, and other teachers or staff members who know the student.

Decide together the best course of action and who should talk to the student and family members. For more information on how to talk to students and family members, see the information sheet on "**How To Help a Student.**"

Your goal is to communicate to the student that you care and to refer her or him to a health care provider knowledgeable about eating disorders.

“I helped conduct a scoliosis screening and was amazed by the at-risk behaviors exhibited by the 11-year-old girls. They are obsessed with how they measure up to the images on MTV.”

—Nursing supervisor, Grade 5 School, Massachusetts

When conducting screenings, ensure privacy and address issues related to body image and dieting

If your school conducts height and weight screenings, the nurse or assistant should do the measuring and recording in a private place and in a positive, reassuring, and confidential manner. The American Medical Association recommends asking students questions about body image and dieting patterns.

If students express dissatisfaction with body size or weight, explain that changes in height and weight are normal during adolescence. These changes begin as early as 8 years of age for girls and as late as 14 years of age for boys. Changes in height and weight do not necessarily coincide. Therefore, a girl who begins puberty at 8 or 9 may put on weight before experiencing a growth spurt. Likewise, a boy who begins puberty at age 14 may grow taller, but not heavier. Eventually, height and weight changes stabilize, and students acquire their individual adult shapes and sizes.

If students say they have been on a diet or are trying to lose weight, ask additional questions about the methods they have used. People who develop eating disorders often remember that their problems started when they began dieting. When students go on a restrictive diet, they may lose weight initially but they will inevitably gain it back. Subsequent attempts to lose weight may become more drastic and be accompanied by feelings of guilt, failure, and desire for perfection or control. Dieting also may result in undernutrition and deficiencies in specific nutrients.

Support healthy eating habits and increased exercise

As a nurse or counselor, you can help students resist media and cultural pressures to diet by encouraging them to adopt flexible and healthy eating habits and become engaged in physical activities.

- ◆ Emphasize students’ nutritional needs during puberty.
- ◆ Stress the importance of exercise for fun and fitness.
- ◆ Help increase each student’s self-acceptance.
- ◆ Enhance students’ tolerance of diversity in weight and body shape.

Definitions

Anorexia nervosa is self-starvation. People with this disorder eat very little even though they are thin. They have an intense and overpowering fear of body fat and weight gain.

Bulimia nervosa is characterized by cycles of binge eating and purging, either by vomiting or taking laxatives or diuretics (water pills). People with bulimia have a fear of body fat even though their size and weight may be normal.

Overexercising is exercising compulsively for long periods of time as a way to burn calories from food that has just been eaten. People with anorexia or bulimia may overexercise.

Binge eating disorder means eating large amounts of food in a short period of time, usually alone, without being able to stop when full. The overeating or bingeing is often accompanied by feeling out of control and followed by feelings of depression, guilt, or disgust.

Disordered eating refers to troublesome eating behaviors, such as restrictive dieting, bingeing, or purging, which occur less frequently or are less severe than those required to meet the full criteria for the diagnosis of an eating disorder.

Resources

Included in the BodyWise Information Packet is a list of eating disorders resources selected specifically for middle school personnel. The following resources are of specific interest to school nurses, coaches, and dance instructors.

Eating Disorders Catalogue

A free *Eating Disorders Resource Catalogue*, including a complete listing of current and classic books, is available by contacting:

Gurze Books

P.O. Box 2238
Carlsbad, CA 92018
Tel: (800) 756-7553; Web site: www.gurze.com.

Professional Publications

The following books discuss eating disorders and other girls' health issues and provide specific recommendations for school personnel. Please see the complete resource sheet for more detailed descriptions as well as additional listings.

Berg, Frances M. *Afraid To Eat: Children and Teens in Weight Crisis*. Hettinger, ND: Healthy Weight Publishing Network, 1997.

Phillips, Lynn. *The Girls Report: What We Know and Need To Know About Growing Up Female*. New York: National Council for Research on Women, 1998.

Piran, Niva, Michael P. Levine, and Catherine Steiner-Adair (eds.). *Preventing Eating Disorders: A Handbook of Interventions and Special Challenges*. Philadelphia, Brunner/Mazel, 1999.

Educational Organizations

The National Women's Health Information Center

Tel: (800) 994-8662
Web site: www.4woman.gov

Girl Power!

Tel: (800) 729-6686
Web site: www.health.org/gpower

American Anorexia/Bulimia Association

Tel: 212-575-6200
Web site: www.aabainc.org

National Association of Anorexia Nervosa and Associated Disorders

Tel: 847-831-3438
Web site: www.anad.org

Eating Disorders Awareness and Prevention, Inc.

Tel: 206-382-3587; Referral Hotline: 800-931-2237
Web site: www.edap.org

Harvard Eating Disorders Center

Tel: 617-236-7766
Web site: www.hedc.org

Massachusetts Eating Disorder Association, Inc.

Tel: 617-558-1881
Web site: www.medainc.org

Pennsylvania Educational Network for Eating Disorders

Tel: 412-366-9966
E-mail: PENED1@aol.com.

Center for Media Literacy

Tel: (800) 226-9494
Web site: www.medialit.org

Videos

The following videos on body image, eating disorders, and media literacy can be incorporated into continuing education programs for middle school personnel and/or shown to middle school students and family members.

Slim Hopes: Advertising and the Obsession With Thinness

Tel: (800) 897-0089; Web site: www.mediaed.org

Self-Image: The Fantasy, The Reality

Tel: (212) 684-3940
Web site: www.pbs.org/mix/imgguide.html

Body Talk

Tel: (510) 841-9389
Web site: www.bodypositive.com/theother

NCAA: Nutrition and Eating Disorders

Tel: (800) 526-4773; Web site: www.karolmedia.com